

EXHIBIT F

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK
CASE NO. 1:17-cv-00124-LLS

FEDERAL TRADE COMMISSION and

THE PEOPLE OF THE STATE OF NEW YORK,
by LETITIA JAMES, Attorney General of the
State of New York,

Plaintiffs,

v.

QUINCY BIOSCIENCE HOLDING COMPANY,
INC., a corporation;

QUINCY BIOSCIENCE, LLC, a limited liability company;

PREVAGEN, INC., a corporation d/b/a
SUGAR RIVER SUPPLEMENTS;

QUINCY BIOSCIENCE MANUFACTURING LLC,
a limited liability company; and

MARK UNDERWOOD, individual and as an officer of QUINCY BIOSCIENCE HOLDING COMPANY, INC., QUINCY BIOSCIENCE, LLC, and PREVAGEN, INC.,

Defendants.

REMOTE VIDEOTAPED DEPOSITION OF
JEREMY M. BERG, Ph.D
October 8, 2021

Reported by:

Maureen Broderick, RPR

25 JOB NO. 200431

1
2
3 October 8, 2021
4 10:04 a.m.
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7 Remote videotaped deposition of JEREMY M.
8 BERG, Ph.D., taken via Zoom, before Maureen E.
9 Broderick, Registered Professional Reporter and
10 Notary Public in and of the Commonwealth of
11 Pennsylvania.
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2 APPEARANCES:

3 **ALL ATTENDEES PRESENT VIA ZOOM**

4

FEDERAL TRADE COMMISSION
Attorneys for Plaintiff Federal Trade Commission
600 Pennsylvania Avenue, NW
Washington, DC 20580
BY: ANDREW WONE, ESQ.
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OFFICE OF THE NEW YORK STATE ATTORNEY GENERAL
Attorneys for Plaintiff The People of the State
of New York and Letitia James
28 Liberty Street
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BY: KATE MATUSCHAK, ESQ.

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KELLEY DRYE & WARREN
Attorneys for Defendants Quincy Bioscience Holding
Company, Inc., Quincy Bioscience, LLC, Prevagen,
Inc., d/b/a
Sugar River Supplements, and Quincy Bioscience
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2 APPEARANCES: (Cont'd)

3 COZEN O'CONNOR
4 Attorneys for Defendant Mark Underwood
5 3 World Trade Center
6 175 Greenwich Street
7 New York, NY 10007
8 BY: MICHAEL DE LEEUW, ESQ.
9 TAMAR WISE, ESQ.

10
11
12 ALSO PRESENT: William Ducklow, Investigator
13 Philip Rizzuti, Videographer
14 Jane Azia (Briefly joined)
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1 Jeremy M. Berg, Ph.D.

2 that protein. And so we did some studies about
3 that. And iron, you know, was, again, earlier in
4 my, more earlier in my career, more on the chemical
5 side.

6 Q Is it fair to say that you primarily
7 studied proteins at the cellular level?

8 A More, I would say it's more accurate to
9 say mostly we worked on isolated proteins. So not
10 even at the cellular level, but purified proteins.

11 Q And so that's, that would be in contrast
12 of studying whole organisms, right?

13 A That's right. We did do a few things with
14 whole organisms, but not very much.

15 Q Okay. And your primary research focus
16 does not include human physiology, right?

17 A Not direct studies of humans, but
18 certainly the studies were related to the
19 physiological functions of proteins in humans, some
20 proteins in humans.

21 Q And your primary research focus as you
22 described it does not include protein digestion,
23 right?

24 A Not the primary focus, although we have
25 done some studies that are related to protein

1 Jeremy M. Berg, Ph.D.

2 digestion.

3 Q I'm sorry. You said you did, done some --
4 what?

5 A We did do one study in particular that
6 was, that included a substantial focus on protein
7 digestion.

8 Q And what study was that?

9 A It was a study of an iron-containing
10 protein that we -- if you put in my, put in the
11 report, I can identify the particular paper. We
12 examined a naturally occurring iron-containing
13 protein and compared it to the same protein
14 synthesized out of the D-amino acids as opposed to
15 normal amino acids and looked at the difference in
16 how long they survived in the body in mice.

17 Q I'm sorry. You said earlier that, that
18 your work on iron was early in your career. Was
19 that study early in your career?

20 A No. This was later. Sorry. There were,
21 there were two points where I did iron, both early
22 in my career, and then this one study where we
23 worked on the different iron-containing protein.

24 Q Now, you didn't mention it, but I saw from
25 your CV that you were also for a while the editor in

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1 Jeremy M. Berg, Ph.D.

2 Q You were asked to assume that by counsel?

3 A I don't think I was asked one way or
4 another.

5 Q The scope also goes on to say that you
6 were asked to opine on other possible mechanisms by
7 which Prevagen could have an effect; is that right?

8 A Yes.

9 Q So is it fair to say that your report is
10 about mechanisms of action? Is that right?

11 A It's a discussion of possible or proposed
12 mechanisms of action, yes.

13 Q Okay. And prior to this engagement, had
14 you done any work on, on mechanisms of action for
15 any drug or, or dietary supplement before?

16 A My previous comments about potential roles
17 of zinc falls into that characterization, I would
18 say. But I'm trying to think if there are any
19 other, other examples. I believe that's the only
20 one.

21 Q You say that, in your report that you were
22 asked to opine on these questions based on your
23 expertise in the field.

24 Do you see that?

25 A Yeah, I see that.

1 Jeremy M. Berg, Ph.D.

2 Q What is "the field"?

3 A In this context, I would say the field is
4 biochemistry, physiology, pharmacology.

5 Q And I'm not going to touch biochemistry,
6 because I understand that's your primary area. Are
7 you an expert in pharmacology?

A In some aspects of pharmacology, yes.

9 0 Okay. Are you a pharmacologist?

10 A I am not.

11 Q What areas of pharmacology are you an
12 expert in?

13 A Based on, largely based on my time at NIH,
14 mechanisms of drug action, pharmacogenomics are the
15 primary ones.

16 Q You also said physiology; is that right?

17 A I did.

18 0 Okay. And you're an expert in physiology?

19 A Again, in some aspects.

20 (Jane Azia joins remotely for brief
21 time.)

22 BY MR. DE LEEUW:

23 Q What aspects of physiology are you an
24 expert in?

25 A General general topics related to

1 Jeremy M. Berg, Ph.D.

metabolism, both in normal and in some, you know,
some disease states.

4 Q And where did you gain this expertise?

5 A I didn't mention it earlier, but I've also
6 been, going on 20-odd years now, been the lead
7 author of a biochemistry textbook, which includes
8 fairly detailed coverage of principals of
9 metabolism.

10 Q And in terms of going back to
11 pharmacology, you said that you consider yourself an
12 expert in drug actions and mechanisms; is that
13 right?

14 A I said mechanisms of drug actions and
15 pharmacogenomics, yes.

16 Q And you said that you gained that
17 expertise while you were at the NIH; is that right?

18 A I certainly had some of it before related
19 to spending time at, doing research and teaching and
20 interacting with people at medical schools. But
21 then at NIH when I was responsible for overseeing
22 the programs, my degree of familiarity increased.

23 Q So your degree of familiarity increased.
24 Did you publish any studies on the mechanisms of
25 drug actions?

1 Jeremy M. Berg, Ph.D.

2 A I do.

3 Q Okay. And when you say "the experts in
4 the relevant scientific fields," what are the
5 relevant scientific fields?

6 A So the fields related to the drug
7 development or supplement efficacy. I mean, the
8 point I was trying to make is that for a number of
9 reasons, there's great interest in the use of
10 proteins, specific proteins as, as drugs were in
11 other functions.

12 And there, it would be beneficial
13 both for individuals and for commerce if the
14 materials could be delivered orally, but they're not
15 because of the problems that I discuss in the
16 report.

17 Q I get that. I just, I'd like to know --
18 and we'll get into that in a little bit. You said
19 "the experts in the relevant scientific fields." I
20 just want to know what the relevant scientific
21 fields are.

22 A You know, I think if this claim were -- a
23 claim like this, I think biochemists,
24 pharmacologists, neuroscientists would all be
25 intrigued and eager to see evidence, physiologists,

1 Jeremy M. Berg, Ph.D.

2 physicians.

3 Q You said earlier that there are people
4 studying the use of proteins for, as drugs or other,
5 for other benefits; is that right?

6 A Yes.

7 Q In fact, there's a lot of them, a lot of
8 studies that relate to trying to use proteins as,
9 for, as either drugs or as supplements; is that
10 right?

11 A There are certainly lots of studies as
12 proteins as drugs. I don't know so much about
13 supplements, but yes.

14 Q When you said the, when you said "experts
15 in the relevant scientific fields," which of those
16 fields do you consider yourself an expert in?

17 A In the context of this statement, I would
18 say, you know, certainly biochemistry, but also
19 pharmacology.

20 Q Now, for those other fields that you
21 mentioned, did you speak to any other experts about
22 what evidence they would require?

23 A Not in this context. But I've been
24 involved in conversations over decades about
25 proteins as drugs, or the possibility of proteins as

Jeremy M. Berg, Ph.D.

2 drugs. Indeed that was one of the, the paper that I
3 mentioned was -- that I had done previously on
4 protein degradation in mice was related to that
5 question.

6 Q Actually, because you have your report in
7 front of you now, can you look and tell me which
8 article that was or which study that was?

A It's reference 60 in my CV.

10 Q It's called: A comparison of the -- I'm
11 going to get these words --

12 (Reporter clarification.)

13 THE WITNESS: A comparison of the
14 immunogenicity of protein enantiomers.

15 BY MR de LEEUW:

16 Q You did that work in 1993?

17 A The paper was published in 1993. yes.

18 Q What role did you -- I notice that there's
19 a number of authors of that article. What role did
20 you play in that article?

21 A I conceived of the experiment, and I was
22 not involved directly in the experimental studies.

23 Q So the other listed authors conducted the
24 study; is that right?

25 A The primary, primary research -- the

1 Jeremy M. Berg, Ph.D.

2 primary experimental work was done by Dr. Simer [ph]
3 and Dr. Howard Densis [ph].

4 Q And that was -- I'm bad at math -- but 28
5 years ago; is that right?

6 A Something like that, yeah.

7 Q And is it fair to say that our knowledge
8 about, about proteins has grown in the last 28
9 years?

10 A That's true, although the -- yes.

11 Q I hope so.

12 All right. So getting back to the
13 report, you said in paragraph ten, you say: As a
14 protein, apoaequorin would be expected to degrade
15 into amino acids and possibly some small peptides in
16 the stomach.

17 Do you see that?

18 A I do.

19 Q Okay. Is that true of all proteins?

20 A It's true of the great majority of
21 proteins, yes. Not of all proteins but of the great
22 majority of proteins.

23 Q What types of proteins aren't degraded
24 into amino acids and small peptides in the stomach?

A There are some proteins that are more

Jeremy M. Berg, Ph.D.

2 resistant to degradation in the, in the stomach.
3 They tend to be proteins that function
4 extracellularly -- that is, they function outside
5 the cell rather than inside the cell -- so that
6 there are, you know, there are biological reasons
7 that they need to be more robust and more resistant.

8 Q You said, you go on to say: Therefore --
9 and the "it" here is apoaequorin -- could not enter
10 the bloodstream as an intact protein.

11 Do you see that?

12 A Yes.

13 Q And are you a hundred percent certain of
14 that?

15 A The only qualification that I would add to
16 any is, to any appreciable extent -- I mean, I can't
17 rule out that a tiny amount could get in, but...

18 Q And you haven't personally done any
19 experiments to determine whether or not any intact
20 apoaequorin could get into the bloodstream; is that
21 fair to say?

22 A I have not personally done those
23 experiments -- any experiments.

Q Is it also possible that large peptides from apoaequorin could enter the bloodstream?

Jeremy M. Berg, Ph.D.

2 A Again, anything is possible. But as I
3 stated, as I discuss later in the report, there's no
4 evidence that that's the case. And one would be,
5 based on the behavior of most proteins, one would be
6 surprised if that were true.

7 Q You're not an expert on human digestion,
8 are you?

9 A I'm not an expert on human digestion. I
10 am an expert on sort of general characteristics of
11 digestion.

12 Q Do you understand different people digest
13 things differently? Do you understand that?

14 A Yes, I do understand that.

15 O You're not a gastroenterologist, right?

16 A I am not.

17 Q I may have asked this, but you didn't
18 conduct any digestion studies on Prevagen or
19 apoaequorin, right?

20 A I did not.

21 Q And you cite the Goodman study for the
22 proposition that apoaequorin is rapidly digested in
23 the stomach; is that right?

24 A What --

25 O This is in paragraph 11 of your report.

1 Jeremy M. Berg, Ph.D.

2 Q What's the other one?

3 A The other is that if there were a peptide
4 that -- if there were a peptide that were derived
5 from apoaequorin that had some biological activity,
6 one, it would be common to many other proteins; but
7 two, there's no, no biological context why that
8 would likely to have evolved.

9 Q And in that paragraph, I don't see where
10 you're talking about the evolutionary theory.

11 A I'll have to...

12 Q You end that section by saying: In
13 addition, Quincy Bioscience does not appear to have
14 made any attempt --

15 A Right.

16 Q -- to identify or characterize any such
17 degradation products despite the availability of
18 methods.

19 Do you see that?

20 A Yeah. It may, it may actually be in my
21 other report. I'll have to look for it.

22 Q Okay. And what's -- when you say "the
23 availability of methods," what methods are you
24 referring to?

25 A There are a variety of methods for looking

1 Jeremy M. Berg, Ph.D.

2 at the degradation products of a protein with much
3 more resolution than the gel method that was used in
4 the Goodman experiment. So (inaudible).

5 COURT REPORTER: Say it again.

6 THE WITNESS: High-performance liquid
7 chromatography and mass spectrometry where you
8 can fractionate. You can separate all the
9 products of degradation into many more separate
10 entities from amino acids to peptides and then
11 identify what they are based on their, by their
12 mass.

13 BY MR. de LEEUW:

14 Q Were you asked to perform those
15 experiments?

16 A I was not.

17 O Is that something that you could do?

18 A I don't currently have a laboratory, so
19 no. But in the past, that would have been something
20 that I could have done.

21 Q Have you ever done those, that type of
22 experiment with any compound?

23 A Not -- well, yes. With protein, with
24 other proteins

25 0 Which proteins?

Jeremy M. Berg, Ph.D.

2 A So-called zinc-finger proteins, the
3 proteins I mentioned earlier on.

4 Q So you've done experiments where you used
5 methods to determine in the human body where a
6 protein is broken?

7 A Not in the human body, no. But in
8 treatment with, with digestive enzymes figuring out
9 where the protein is broken and what the products
10 are.

11 MR. de LEEUW: We've been going, I think,
12 for about 90 minutes. Why don't we take a, why
13 don't we take a ten-minute break and then we'll
14 resume.

15 THE WITNESS: Okay.

16 MR. de LEEUW: Sound good?

17 THE WITNESS: Sounds good.

18 VIDEO OPERATOR: The time is 11:23 a.m.,
19 and we are going off the record.

20 (Brief recess.)

21 VIDEO OPERATOR: The time is 11:40 a.m.,
22 and we are back on the record

23 BY MR de TEEUW:

24 Q Dr. Berg, I wanted to talk a bit about the
25 blood-brain barrier. Could you explain what the

1 Jeremy M. Berg, Ph.D.

2 Q Okay. And once again, your general
3 knowledge of the, of the gut-brain axis comes from
4 where?

5 A Seminars that I've attended over, over
6 years. I don't know if, both at -- probably, you
7 know, at Pitt and at Hopkins and probably at NIH.

8 Q We covered a bit of this earlier. I just
9 want to go through it in a bit more detail. Just
10 because a mechanism of action for a compound is
11 unknown does not mean that it has no therapeutic
12 effect, correct?

13 A That's true.

14 Q And I assume that you're aware that drugs
15 have been approved by the FDA without a known
16 mechanism of action, true?

17 A True.

18 Q In fact, there's many drugs that have no
19 known mechanism of action. right?

20 A I don't know about many, but, yes, there
21 certainly are drugs.

22 Q And the FDA doesn't require that you have
23 a mechanism of action to approve a drug; is that
24 right?

25 MS. MATUSCHAK: Objection to the extent

1 Jeremy M. Berg, Ph.D.

2 that it's outside the scope of Dr. Berg's
3 reports.

4 But you can answer.

5 BY MR. de LEEUW:

6 Q If you know.

7 A I don't have a detailed knowledge of that,
8 but I believe that's correct.

9 Q Okay. And do you believe that a mechanism
10 of action is required for a dietary supplement?

11 MS. MATUSCHAK: Same objection.

12 THE WITNESS: It's outside my expertise.

13 But I don't believe it is.

14 BY MR. de LEEUW:

15 Q Okay. And it's not uncommon for
16 scientists to observe phenomena without knowing what
17 a mechanism of action is, right?

18 A Yes.

19 Q Okay. In fact, part of science is trying
20 to determine the mechanism of action, right?

21 A That's true, yes.

22 Q You're aware that for a long period of
23 time, there was no known mechanism of action for
24 aspirin, right?

25 A Yes, that's true, although it's been known

1 Jeremy M. Berg, Ph.D.

2 for quite some time.

3 Q And were you aware that that's also true
4 for acetaminophen?

5 A Yes.

6 Q And also ibuprofen?

7 A Yes.

8 Q And you're aware that that's also true for
9 a whole class of antidepressants?

10 A Yes.

11 Q You would agree that for those compounds
12 there, there are clinical impacts without a known
13 method, mechanism of action, right?

14 A There's clinical impacts and also very
15 strong evidence that they are effective.

O What's a novel mechanism of action?

17 A Novel in this context would mean unusual
18 or, or, you know, not well-precedented.

19 Q Did you consider the possibility in
20 writing your report that metabolized components of
21 apoaequorin could be actively transported?

22 A So the products of apoaequorin are
23 peptides and amino acids, and there are certainly
24 some peptides and amino acids that are actively
25 transported. So, yes.

1 Jeremy M. Berg, Ph.D.

2 Q Did you consider whether apoaequorin could
3 react with receptors either in the stomach or
4 elsewhere in the mucus membranes of the GI tract?

5 A In principle, but there's, again, no
6 biological reason that those receptors should be
7 present for a protein that has no homolog in
8 anything that we would normally come in contact
9 with.

10 Q But your report didn't analyze that as a
11 possible mechanism of action, right?

12 A I don't think I discussed that
13 specifically, no.

14 Q And you didn't discuss whether or not a
15 bioactive peptide could be actively transported,
16 right?

17 A Well, active transport doesn't, that just
18 relates to how -- again, the products are, proteins
19 are peptides and amino acids. And those are, some
20 of those are actively transported, but there's
21 nothing specific.

22 Q And did you consider the possibility that
23 apoaequorin could elicit a pharmacological signaling
24 cascade from within the stomach?

A Again, there's no reason to think that

1 Jeremy M. Berg, Ph.D.

2 there should be any such signaling cascade. So I
3 probably considered it, but ruled it out as being --

4 Q Sorry.

5 It's not addressed in your report; is
6 that correct?

7 A I believe it's not addressed in my report.

8 Q What is a prodrug?

9 A A prodrug is a compound which is taken
10 which is then converted by, typically, enzymes in
11 your body into something that's actually the active
12 compound that has the biological effect.

13 Q So it's taking one thing and then
14 essentially the active ingredient is created in the
15 stomach or in some part of the human?

16 A Yeah. I mean, it's typically more often
17 in the liver or kidneys, but yes.

18 Q And have you studied prodrugs before?

19 A Not experimentally, but I have been
20 involved in studies of the use of compounds which
21 are prodrugs in humans, in populations since I've
22 been at Pitt.

Q Your report does not address the possibility that apoaequorin or any metabolized components of apoaequorin could be transported or

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Jeremy M. Berg, Ph.D.

2 absorbed and form a prodrug, did it?

3 A It did not. But again, the products are
4 amino acids or -- amino acids or peptides. And I
5 know of no examples where those are prodrugs.

6 Q Have you ever heard the phrase "competent
7 and reliable scientific evidence"?

8 A I've heard the phrase. I don't know its
9 technical meaning.

10 Q In your report at paragraph ten -- I'm
11 sorry. Let me get there.

Are you there, paragraph ten?

15 A I am.

16 Q Okay. So this is a paragraph about --
17 and, again, I'm going butcher the pronunciation --
18 ziconotide? Is that right?

19 A Uh-huh.

20 0 Okay. And what is ziconotide?

21 A It's a small protein derived from marine
22 cone snails, which has been, which blocks specific
23 calcium channels. And it's been studied extensively
24 and have proved as a medication for treatment of
25 chronic pain.

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3 C E R T I F I C A T E
4

5 COMMONWEALTH OF PENNSYLVANIA :
6 :
7 COUNTY OF PHILADELPHIA :
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10 I, MAUREEN BRODERICK, Registered
11 Professional Reporter - Notary Public, within and
12 for the Commonwealth of Pennsylvania, do hereby
13 certify that the proceedings, evidence, and
14 objections noted are contained fully and accurately
15 in the notes taken by me of the preceding
16 deposition, and that this copy is a correct
17 transcript of the same.

18 Dated: October 21st, 2021.

19
20
21 Maureen Broderick
22

23 MAUREEN BRODERICK
24 Registered Professional
25 Reporter - Notary Public

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

FEDERAL TRADE COMMISSION and
THE PEOPLE OF THE STATE OF NEW
YORK, by LETITIA JAMES, Attorney
General of the State of New York,

Plaintiffs,

v.

QUINCY BIOSCIENCE HOLDING
COMPANY, INC., a corporation;

QUINCY BIOSCIENCE, LLC, a limited
liability company;

PREVAGEN, INC., a corporation
d/b/a/ SUGAR RIVER SUPPLEMENTS;

QUINCY BIOSCIENCE
MANUFACTURING, LLC, a limited
liability company; and

MARK UNDERWOOD, individually and as
an officer of QUINCY BIOSCIENCE
HOLDING COMPANY, INC., QUINCY
BIOSCIENCE, LLC, and PREVAGEN,
INC.,

Defendants.

Case No. 1:17-cv-00124-LLS

**ERRATA SHEET FOR JEREMY
M. BERG, Ph.D.**

I, Jeremy M. Berg, hereby make the following corrections to the transcript of my deposition, which occurred on October 8, 2021:

PAGE	LINE(S)	CORRECTION	REASON
44	19	“aquroin” should be “aequorin”	Spelling
51	2	“Simer [ph]” should be “Symer”	Spelling
51	3	“Densis [ph]” should be “Dintzis”	Spelling

56	11	“proteins in major peptides” should be “proteins and major peptides”	Typographical error
69	20	“SARS-Co-V-2” should be “SARS-CoV-2”	Spelling
70	24-25	“angiotensin 2 converting enzyme” should be “angiotensin converting enzyme 2”	Proper name of substance
96	15	“rebuttal article” should be “rebuttal report”	Proper name of the document

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on November 20, 2021.



JEREMY M. BERG, Ph.D.